PATENT APP ATION FEE DETERMINATION REC

Application or Docket Number

	CLAIMS AS FILED - PART I							,	1/5	143 T	62												
	II S NATION		(Column 1)	(Column 2)	-	SMALL EN		· · · (OT SMA	OTHER THAN												
F	U.S. NATIONAL STAGE FEES		s	•		7				SIMA	TT ENTITY												
	BASIC FEE		SMAL	LEAT. = \$ 150	LARGE ENT. =\$ 300	,	RATE			· RATI	E FEE												
	EXAMINATION	FEE	Satisfies (4) =	PCT Article 33(1)- \$ 50 / \$ 100	All other situations = \$ 100 / \$ 200	1 '	BASIC FEE	-	19	OR BASIC FEI	E 300												
	SEARCH FEE		U.S. is is	A = \$50/\$100 ver countries =	All other situations =	\dashv	EXAM FEE		_	EXAM FE	200												
	FEE FOR EXTRA SPEC. PGS.		- 1 2	minus 100 =	\$ 250 / \$ 500	41	SEARCH FE			SEARCH F	10												
	TOTAL CHARGEABLE CLAIMS		34	minus 20 =	/50 =	4	X \$ 125		_	X\$ 250													
	INDEPENDENT CLAIMS		3	minus 3 =		┨╏	X \$ 25 =			R X \$ 50	= 900												
Å		ENDENT CLAIM P		<u>-</u>		H	X \$ 100 =		O	X \$ 200	=												
ı,	If the differen	ce in column 1 i	s less than	cero, enter o	in column 2	J L	+\$ 180 =	-	OF	1 000	= 360												
	4			•			TOTAL		OF	TOTAL	LYEC												
AMENDMENTA	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							•		•													
		. 1	SMALL	ENTITY	OR	OTHE	RTHAN																
	<	REMAINING AFTER	1	HIGHES	R PRECENT	1		ADDI-	. T	OUIVER	ENTITY												
	ž	AMENDMENT		PREVIOUS PAID FO	SLY EXTRA		RATE	TIONAL	1/	RATE	ADDI- TIONAL												
	Total	1.94	Minus .	-30	=		X \$ 25 =	FEE	OR		FEE												
	`.	1. 3	Minus	3	5 -	-	\$ 100 =	-/	OR	X \$ 50 =	1/												
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						\$ 180 =	/	J	∧ \$ 200 =	/												
						-	TAL ADDIT.	<u>/-</u>	OR	+\$360=	1												
				•	•		FEE		OR	TOTAL ADDIT													
-	T	(Column 1)	7	(Column 2			•																
AMENDMENT B	l	REMAINING		HIGHEST MUMBER																			
	Total	AFTER AMENDMENT		PREVIOUS PAID FOR	Y FYTDA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL												
	Independent		Minus	**	=	×	\$ 25 =		OR	X \$ 50 =	FEE												
		L	Minus	***	=	X	100=		ŀ	X \$ 200 =													
		ENTATION OF ME	JUTIPLE DEP	ENDENT CLAI	М	1	180 =			+\$360=													
	• • • • • • • • • • • • • • • • • • •									OTAL ADDIT.													
	•			*						FEE													
". If the entry in column 1 is less than the entry in column 2, write "O" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20". The "Highest Number Previously Paid For" IN THIS SPACE is less than "3", enter "3".																							
													The "Highest Number Previously Paid For" (N THIS SPACE is less than "3", enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.										